

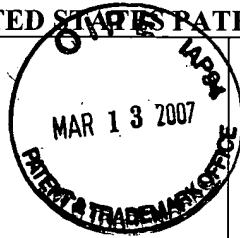
IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicants: SATO *et al.*

Serial No.: 10/614,895

Filed: 7/9/2003

Title: HYBRID COMPRESSOR AND  
CONTROL DEVICE



Atty. Dkt.: 01-442

Art Unit: 3746

Examiner: Dwivedi, Vikansha S

**Allowed: December 27, 2006**

**Confirmation No.: 8423**

Commissioner for Patents  
Alexandria, VA 22314  
**Mail Stop Issue Fee**

March 13, 2007

**ISSUE FEE TRANSMITTAL LETTER**

Sir:

Enclosed are one original and one copy of an executed Issue Fee Transmittal Form PTOL-85B for the above allowed patent application as well as a check in the amount of \$1700.00 for payment of the requisite issue fee and publication fee.

Authorization is hereby given to charge any fee deficiencies or credit any overpayment to Deposit Account 50-1147.

Respectfully submitted,

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# PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: **Mail** Mail Stop ISSUE FEE  
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23400 7590 12/27/2006  
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(Depositor's name)
(Signature)
(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/614,895	07/09/2003	Kimihiko Sato	01-442	8423

TITLE OF INVENTION: HYBRID COMPRESSOR AND CONTROL DEVICE

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$300	\$0	\$1700	03/27/2007

EXAMINER	ART UNIT	CLASS-SUBCLASS
DWIVEDI, VIKANSHA S	3746	417-374000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).  
☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  
☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list  
 (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  
 (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 Posz Law Group, PLC  
 2 \_\_\_\_\_  
 3 \_\_\_\_\_

## 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. 03/14/2007 MAHMEDE 00000003 10614895

(A) NAME OF ASSIGNEE

**DENSO CORPORATION**

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

**Kariya-city, Japan**

01 FC:1501 1400.00 0P  
 02 FC:1504 300.00 0P

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

## 4a. The following fee(s) are submitted:

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☒ Publication Fee (No small entity discount permitted)  
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## 5. Change in Entity Status (from status indicated above)

☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature

**David G. Posz**

Date **March 13, 2007**

Typed or printed name

Registration No. **37,701**

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